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PTO/SB/47 (03-09)

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For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:

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PATENT NUMBER (if known)	APPLICATION NUMBER
7,171,681	09/774,001

Completed by (check one):

<input type="checkbox"/> Applicant/Inventor	/Richard A. Schafer/	Signature
<input checked="" type="checkbox"/> Attorney or Agent of record	45,078 (Reg. No.)	Schafer, Richard A Typed or printed name
<input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		832-446-2400 Requester's telephone number
<input type="checkbox"/> Assignee recorded at Reel _____ Frame _____	4/6/2013	Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ * Total of 1 forms are submitted.

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